

BAR CODE LABEL



## U.S. PATENT APPLICATION

SERIAL NUMBER

08/482,402

FILING DATE

06/07/95

CLASS

530

GROUP ART UNIT

1803

APPLICANT

BASIL RAPOPORT, LARKSPUR, CA.

\*\*CONTINUING DATA\*\*\*\*\*

VERIFIED THIS APPLN IS A DIV OF 08/196,082 03/03/94 ABN

\*\*FOREIGN/PCT APPLICATIONS\*\*\*\*\*

VERIFIED

FOREIGN FILING LICENSE GRANTED 08/28/96

STATE OR  
COUNTRY

CA

SHEETS  
DRAWING

53

TOTAL  
CLAIMS

5

INDEPENDENT  
CLAIMS

1

FILING FEE  
RECEIVED

\$880.00

ATTORNEY DOCKET NO.

102105.151CI

ADDRESS

HENRY N WIXON  
HALE AND DORR  
THE WILLARD OFFICE BUILDING  
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TITLE

DISEASE ASSOCIATED HUMAN AUTOANTIBODIES SPECIFIC FOR  
HUMAN THYROID PEROXIDASE

This is to certify that annexed hereto is a true copy from the records of the United States  
Patent and Trademark Office of the application which is identified above.

By authority of the  
COMMISSIONER OF PATENTS AND TRADEMARKS

Date

Certifying Officer



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Bib Data Sheet

CONFIRMATION NO. 2315

SERIAL NUMBER 08/482,402	FILING DATE 06/07/1995  RULE	CLASS 435	GROUP ART UNIT 1642	ATTORNEY DOCKET NO. 102105.151CI	
APPLICANTS  BASIL RAPOPORT, LARKSPUR, CA;  ** CONTINUING DATA ***** This application is a DIV of 08/196,082 03/03/1994 ABN  ** FOREIGN APPLICATIONS *****  IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 08/28/1996					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged Examiner's Signature _____ Initials _____		STATE OR COUNTRY CA	SHEETS DRAWING 53	TOTAL CLAIMS 5	INDEPENDENT CLAIMS 1
ADDRESS 33197 STOUT, UXA, BUYAN & MULLINS LLP 4 VENTURE, SUITE 300 IRVINE, CA 92618					
TITLE <i>to charge invent B</i> DISEASE ASSOCIATED HUMAN AUTOANTIBODIES SPECIFIC FOR HUMAN THYROID PEROXIDASE					
FILING FEE  RECEIVED 1058	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		



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## APPLICANTS

BASIL RAPOPORT, LARKSPUR, CA;

## \*\* CONTINUING DATA \*\*\*\*\*

This application is a DIV of 08/196,082 03/03/1994 ABN

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 08/28/1996

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 53	TOTAL CLAIMS 5	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	Verified and Acknowledged Examiner's Signature _____ Initials _____			

## ADDRESS

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4 VENTURE, SUITE 300  
IRVINE, CA  
92618

## TITLE

SEQUENCES ENCODING NOVEL HUMAN THYROID PEROXIDASE PROTEINS AND POLYPEPTIDES

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